



STATE OF TENNESSEE
DEPARTMENT OF COMMERCE & INSURANCE
DIVISION OF FIRE PREVENTION
ADMINISTRATIVE SERVICES SECTION
PERMITS AND LICENSES UNIT
500 JAMES ROBERTSON PARKWAY
THIRD FLOOR
NASHVILLE, TN 37243-1159

Phone: (615) 741-1322
Fax: (615) 741-1583

APPLICATION FOR OUTDOOR FIREWORKS, PROXIMATE PYROTECHNICS, OR FLAME EFFECTS OPERATOR CERTIFICATION

(Certifications expire two years from the date of issuance.)

(Pursuant to Title 68, Chapter 104, Tennessee Code Annotated)

CERTIFICATION FEE: **\$100 for each certification, \$200 maximum.** \$20 of each certification is non-refundable.
(Checks or money orders should be made payable to the Department of Commerce and Insurance.)

Print or type. All questions must be answered before the application will be processed. An incomplete application may result in non-issuance of the certification.

Check each operator certification desired: ☐ Outdoor Display ☐ Proximate Pyrotechnic ☐ Flame Effects

Name of Operator _____

Mailing Address

Street: _____

City: _____ State: _____ Zip: _____ Telephone #: () _____

Email address: _____ Fax #: () _____

Home Address (if different than mailing address)

Street: _____

City: _____ State: _____ Zip: _____ Telephone #: () _____

Social Security #: _____ Date of Birth: ____/____/____ (Must be at least 21 years of age)

Have you been convicted of or plead guilty or nolo contendere to any state or federal felony? ☐ Yes ☐ No
If yes, provide additional information. Include (1) date, (2) charge, (3) place, (4) court, and (5) action taken.

Submit three (3) completed VERIFICATION OF EXPERIENCE FOR FIREWORKS/PYROTECHNICS/FLAME EFFECTS OPERATOR CERTIFICATION forms for **each** certification desired. All forms must be signed by the event operator or authority having jurisdiction (AHJ).

Once the application has been reviewed and approved, the applicant must take and pass the state exam for each certification area desired. If the applicant is eligible for testing, the applicant will be contacted and told how to register for the exam. It is the applicant's responsibility to acquire all materials needed for the exam.

I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND THE FIREWORKS LAWS FOR THE STATE OF TENNESSEE. I FURTHER CERTIFY THAT ALL ANSWERS GIVEN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF APPLICANT

DATE



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DAVY CROCKETT TOWER
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**VERIFICATION OF EXPERIENCE FOR FIREWORKS/PYROTECHNICS/FLAME EFFECTS
OPERATOR CERTIFICATION
(To be submitted with Operator's Application)**

INSTRUCTIONS:

APPLICANT: USE SEPARATE FORMS FOR EACH EVENT (3 required). Proof of work under competent supervision of three (3) displays within the three (3) years immediately preceding the application must be provided for each operator classification applied for. Print or type all information. The event operator or authority having jurisdiction must sign the statement for each display to be considered for approval. **ALL REFERENCES MUST BE VERIFIABLE.**

EVENT OPERATOR or AUTHORITY HAVING JURISDICTION: Review the information provided by the applicant. If the information is adequate, sign the statement at the bottom confirming competency.

Event Operator: The person having knowledge and ability to safely assemble and discharge fireworks/pyrotechnics/flame effects with supervisory responsibility of the event.

Authority Having Jurisdiction (AHJ): An individual responsible for enforcing the requirements of a code or standard, or for approving equipment, materials, installations, or procedures (as defined by the National Fire Protection Association).

Date of Display: _____		Name of Display: _____	
Display Location (City, County, State): _____			
Name of Applicant: _____		Type of Display: <input type="checkbox"/> Proximate <input type="checkbox"/> Outdoor <input type="checkbox"/> Flame Effects	
Applicant's Duty(s): _____ _____ _____			
Name of Event Operator: _____		Name of the AHJ: _____	
Event Operator's Address: _____ _____ _____		AHJ's Address: _____ _____ _____	
Event Operator's Phone Number: () _____		AHJ's Phone Number: () _____	

I have acted as (circle one) event operator / authority having jurisdiction for this event, and I am competent in the knowledge of standards, codes and safety regulations for the type of display indicated above.

Signature: _____ Date: _____